Statement of Organization - Candidate Committee				Amendment  Yes No		
Use this form to create a new or update an existing candidate committee.				* * * * * * * * * * * * * * * * * * * *		
	companied by forms CRO-3100 and CR	O-3500 (when amend)	ng, only re	submit if appli	sable).	
1. Committee Information				c. ID Number		
a. Full Name				and the second of the second o		
BIRKHE	M					
h. Mailing Address (incli	ude City, State and Zip Code)	' IN-PERS	ON	d. Date Organized		
4 Bobby Parker Pl Durham, MC 27703		MAR 1 0 2014 DURHAM BOE		2/28//	· 2/	
				e. Phone Number		
				919-423-4947		
2. Candidate Information		Candidate's Primary Committee		ittee		
a. Full Name		e. Candidate ID Number		f. Party Affiliation		
Clarence F	Franklin Birkheal			Dem (Indicate Non-partis	an if applicable)	
b. Mailing Address (include City, State, and Zip Code)		g. Office Sought				
4 Bobby Parker Pl		Sheriff				
c . Phone Number	d Email Address	h. Next Election Year	i. Ju	risdiction		
	15harelvision 6 gmoil-com	and the state of the commence of the state o		A. A		
☐ Email copy of notices		2014				
3. Treasurer Information		4. Custodian of Books Information				
a. Full Name		a. Full Name				
Lioyo Patillo						
b. Mailing Address (include City, State, and Zip Code)		b. Mailing Address (include City, State, and Zip Code)				
4708 CLMBERLAND DR						
DURHAM, NC 27705						
c. Phone Number d. Email Address		c. Phone Number d.	Email Add	ress	www.mann.mann.mann.mann.mann.mann.mann.m	
(919)423 4947	Ipatillo@gmail.com					
I prefer to receive notices by email Yes No		Email copy of notices				
5. Assistant Treasu	6. Account Informat	· · · · · · · · · · · · · · · · · · ·	1. CRO-3500)	Add		
a. Full Name	a. Financial Institution F	ull Name	L	Remove		
		Weus Fargo				
Wells targo		b. Purpose				
b. Mailing Address (include City, State, and Zip Code)		U. Ful pust				
Sarings		DEERATION				
c. Phone Number	d, Email Address	c. Account Code d.	. Туре			
1399	Sarings	1413	OHECI	KING		
Email copy o		1				
CERTIFICATION						
I certify that the C Chapter 163 of the	ommittee or Fund is in compliance with NC General Statutes and that no funds at this report is complete, true and corre	are commingled with p	ns of Artic prohibited	cle 22A, 22B & or other non-dis	22D-22M of closed funds.	
Clarence	Tranklin Brokhead Clared Name of Signer	ignature of Appointed Treasu	reac orer	3/10/	114	